As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first

and joint inventor (if plural nar a patent is sought on the inventor Ink Rationing Based On Page C	nes are listed below) of ntion entitled:	the subject matter v	vhich is claimed and for which
the specification of which is a	ttached hereto unless th	e following box is ch	necked:
-	as US Application No. or PCT International Application		
Number	and was amended on (if applicable).		
I hereby state that I have revincluding the claims, as amen disclose all information which	ded by any amendment	(s) referred to above	above-identified specification, e. I acknowledge the duty to CFR 1.56.
Foreign Application(s) and/or Claim of I hereby claim foreign priority benefit inventor(s) certificate listed below and	s under Title 35, United State	es Code Section 119 of a	ny foreign application(s) for patent or patent or patent or inventor(s) certificate having
a filing date before that of the applica	tion on which priority is claim	ed:	•
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: NO:
			YES: NO:
Provisional Application II hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:			
TET	APPLICATION NUMBER	FILING DATE	
		·	
ੀਂ ਿੱU. S. Priority Claim			
insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: APPLICATION NUMBER FILING DATE STATUS (patented/pending/abandoned)			
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POWER OF ATTORNEY: As a named inventor, I hereby apportunities in the Patent and Trademark Customer Number	Office connected therewith:	and/or agent(s) to prose Place Customer Number Bar Code Label here	cute this application and transact all
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made on information and be with the knowledge that w	lief are believed to be t illful false statements a Section 1001 of Title 1	rue; and further tha [.] and the like so ma 18 of the United Sta	re true and that all statements these statements were made de are punishable by fine or tes Code and that such willfulnt issued thereon.
Full Name of Inventor: Donald X. Smith II		Citizenship: US	
Residence: 2990 NW	/ Acacia Place, Corvallis	, OR 97330	
Post Office Address: Sapte as residence			
Inventor's Signature	(e		